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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docker Number:

09 | 904280

APPLICATION AS FILED – PART I

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a), (b), or (c))		
SEARCH FEE (37 CFR 1.16(k), (l), or (m))		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		
TOTAL CLAIMS (37 CFR 1.16(l))	20	minus 20 = *
INDEPENDENT CLAIMS (37 CFR 1.16(h))	5	minus 3 = *
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))		

* If the difference in column 1 is less than zero, enter "0" in column 2.

TOTAL

	RATE (\$)	FEE (\$)
OR	X	=
	X	=

APPLICATION AS AMENDED – PART II

b | 12 | ab

12 0b		(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	A N B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(j))	* 3	Minus ** 20	= /
	Independent (37 CFR 1.16(h))	* 3	Minus *** 5	= /
	Application Size Fee (37 CFR 1.16(s))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))				

SMALL ENTITY

	OTHER THAN SMALL ENTITY	
OR	RATE (\$)	ADDITIONAL FEE (\$)
OR	X	=
OR	X	=
OR		
OR		
OR	TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(l))	*	Minus	** =
Independent (37 CFR 1.16(h))	*	Minus	*** =
Application Size Fee (37 CFR 1.16(s))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			

RATE (\$)	ADDITIONAL FEE (\$)
X	=
X	=
TOTAL ADD'L FEE	

RATE (\$)	ADDITIONAL FEE (\$)
X =	
X =	
TOTAL ADD'L FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" IN THIS SPACE is _____.

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